/	\		;					$\vec{-}_{\mathbf{r}_{i}}$	Application				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								Application or Docket Number					
_		_	09765570										
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN													
Ŧ	OTAL CLAIMS	S	(Column 1) (Column 2)				רד	TYPE			OTHER THAN OR SMALL ENTITY		
FOR							RATE	FEE	7	RATE	FEE		
			NUMBER FILED NUM			BER EXTRA	BASIC F		355.00	OR	BASIC FE	710.00	
TOTAL CHARGEABLE CLAIMS			4 minus 20= *					X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PR			2 minus 3 =					X40=	 	1	X80=	-	
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT			 			OR		 		
- 1	f the difference	e in column 1 is	ero, enter "0" in column 2			L	-135=		OR	+270=			
CLAIMS AS AMENDED - PART II							7	OTAL	<u> </u>	OR	TOTAL	712,00	
	(Column 1) (Column 2) (Column 3)											THAN ENTITY	
⋖		CLAIMS REMAINING	44	HIGH NUME	ST	PRESENT			ADDI-) 	JINALL	ADDI-	
EN		AFTER AMENDMENT		PREVIO	USLY	EXTRA	ſ	RATE	TIONAL		RATE	TIONAL	
AMENOMENT	Total	• 4	Minus	** 21		= /-	占	(\$ 9=	FEE /	1	V#10	FEE	
ME	independent	. 2-	Minus)		= /-	-		/ -	OR	X\$18=		
Ľ	FIRST PRESI	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						(40=		OR	X80=		
										OR	+270=	/	
								TOTAL IT. FEE		OR ,	TOTAL ADDIT, FEE		
- 1	· · · · · · · · · · · · · · · · · · ·	(Column 1)	-	(Colum		(Column 3)				•			
N 18		REMAINING AFTER		NUMB	BER	PRESENT	Г	ATE	addi- Tional	ſ		ADDI-	
M		AMENDMENT		PAID F		EXTRA		AIE	FEE		RATE	TIONAL FEE	
AMENDMENT	Total	· 1	Minus	00		= /	×	\$ 9=		OR	X\$18=	/	
₹	Independent	NTATION OF ME	Minus	>		= /-	X	40=		OR	X80≖	/	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							- I	1			/-	
	(35≖ TOTAL		OR	+270≃		
	(Caluma 4)									OR A	TOTAL DOIT, FEE		
o		(Column 1) CLAIMS		(Colum HIGHE	ST	(Column 3)				_			
		REMAINING AFTER		PREVIO		PRESENT EXTRA	R	ATE .	ADDI- TIONAL	l	RATE	ADDI- TIONAL	
NOMENT	Total	AMENDMENT . /C/	Minus	PAID F	^				FEE		HAIE	FEE	
AMEN	Independent	. 17	Minus Minus	<u> 2</u>	2	=	X	9=		OR	X\$18≃	/	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				-	X	10=	7	OR	X80=	71		
1135												4	
		mn 1 is less than the						OTAL		OR	+270=		
							ADDIT	FEEL		OR A	TOTAL DDIT, FEE		
		ber Previously Paid		independen	i) is the i	nighest number f	ound in	the appr	opriate box	in colur	no 1,		
MA	PTO-875												

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